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				December	7 14, 2005	(Date)
APPLICATION NO.	FILING DATE		FIRST NAME	D INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/998,762	11/28/2001	TION APPARAT	-	a Bollini	ITP-121US 12/19/2005 MBERHE1	6468 00000017 09998762
ITTLE OF INVENTION: U	LTRAVIOLET STERILIZA	IIION APPARAT	us	\$ \$	01 FC:2501 02 FC:1504 03 FC:4001	700.00 300.00 30.00
APPLN. TYPE	SMALL ENTITY	ISSUE FI	Ê E	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$700		\$300	\$1000	12/14/2005
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JASTRZAB, KR	ISANNE MARIE	1744		422-121000	•	
CFR 1.363). Change of correspond Address form PTO/SB/12 "Fee Address" indicat PTO/SB/47; Rev 03-02 c Number is required. ASSIGNEE NAME AND	e address or indication of "Follence address (or Change of 22) attached. ion (or "Fee Address" Indication more recent) attached. Use RESIDENCE DATA TO B	Correspondence ation form e of a Customer E PRINTED ON T	(1) the na or agents (2) the na registered 2 registered listed, no	• • • •	member a es of up to no name is 3	rPrestia
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23,031 Registration No.

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6 P = 40 11 11	Application Number	09/998,762						
TRANSMITTAL		Filing Date	November 28, 2001					
DEC 1 6 1000 B FORINI		First Named Inventor	Susanna Bollini					
(to be used for all correspondence after initial a	filing)	Art Unit	1744					
W. C. THAN DE WANTED		Examiner Name	JASTF	JASTRZAB, Krisanne Marie				
Total Number of Pages in This Submission	n 4	Attorney Docket No.	STB-1	00US				
E	NCLOSURE	S (Check all that a	pply)					
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Firm Name Signature Printed Name Paul F. Prestia	tien			T == -				
Date December 14, 2005	-	Registratio	n No.	23,0	J31			
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